

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**



Declaration
Submitted
with Initial
Filing

OR



Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

PAG-356

First Named Inventor

Ibarra, Jim

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Thermal Transfer Assembly for Ceramic Imaging

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/>		Customer Number or Bar Code Label		37282		OR <input type="checkbox"/> Correspondence address below	
Name							
Address							
City				State		ZIP	
Country			Telephone			Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR :				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Jim (first and middle [if any])				Family Name Ibarra or Surname			
Inventor's Signature						Date	
Williamsville Residence: City			NY State		US Country		US Citizenship
8171 Woodview Court							
Mailing Address							
Williamsville City			NY State		14221 ZIP		US Country
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Rick (first and middle [if any])				Family Name Wallace or Surname			
Inventor's Signature						Date	
East Amherst Residence: City			NY State		US Country		US Citizenship
8313 Black Walnut Drive							
Mailing Address							
East Amherst City			NY State		14052 ZIP		US Country
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>3</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page ____ of ____

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Karen A.		Family Name or Surname Walsh-Clemens	
Inventor's Signature		Date	
Residence: City East Aurora	State NY	Country US	Citizenship US
Mailing Address 2010 Jamison Road			
Mailing Address			
City East Aurora	State NY	ZIP 14052	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Barry L.		Family Name or Surname Marginean	
Inventor's Signature		Date	
Residence: City Scottsville	State NY	Country US	Citizenship US
Mailing Address 6 Browns Avenue			
Mailing Address			
City Scottsville	State NY	ZIP 14546	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Mike		Family Name or Surname Tao	
Inventor's Signature		Date	
Residence: City Kenmore	State NY	Country US	Citizenship US
Mailing Address 263 Premaine Avenue			
Mailing Address			
City Kenmore	State NY	ZIP 14217	Country US

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION**ADDITIONAL INVENTOR(S)****Suppl mental Sheet**

Page ____ of ____

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Pamela A.		Family Name or Surname Geddes	
Inventor's Signature		Date	
Residence: City Alden	State NY	Country US	Citizenship US
Mailing Address 1250 Lesswing Road			
Mailing Address			
City Alden	State NY	ZIP 14004	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Joel D.		Family Name or Surname Neri	
Inventor's Signature		Date	
Residence: City Youngstown	State NY	Country US	Citizenship US
Mailing Address 416 River Walk Drive			
Mailing Address			
City Youngstown	State NY	ZIP 14174	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Robert P.		Family Name or Surname Wilbert	
Inventor's Signature		Date	
Residence: City Amherst	State NY	Country US	Citizenship US
Mailing Address 3911 Bailey Avenue			
Mailing Address			
City Amherst	State NY	ZIP 14226	Country US

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DECLARATION**ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page ____ of ____

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Barry		Family Name or Surname Briggs	
Inventor's Signature		Date	
Residence: City Kelowna	State BC	Country Canada	Citizenship Canadian
Mailing Address 1078 Mission View Ct.			
Mailing Address			
City Kelowna	State BC	ZIP V1Z 3R3	Country Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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